


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Sep 07, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N96000003594</b> 1. Entity Name FIRST UNITED SMALL PRINT HOLINESS, INC.	
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Principal Place of Business % PAUL MOSS PRESIDENT 5410 NW 14 AVE MIAMI, FL 33142	Mailing Address % PAUL MOSS PRESIDENT 5410 NW 14 AVE MIAMI, FL 33142
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

MOSS, PAUL E  
120 NW 41ST ST  
MIAMI, FL 33127

**DO NOT WRITE IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

<b>Filing Fee is \$81.25</b> <b>Due by September 6, 2006</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MOSS, PAUL E 120 NW 41ST STREET MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D NOTTAGE, CALLIE M 501 NW 44TH STREET MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D MOSS, MARY 120 NW 41ST STREET MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D STRICKLAND, VANESSA M 125-S ROLLING HILL DR TARVIERNIER, FL 33070
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M MOSS, ANTHONY C 120 N W 41ST STREET MIAMI, FL 33127
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

U00000576438  
09/07/06-80006-010 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Paul E Moss 9-4-06, 305,696,0236  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #